



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 9149

|  |   |  |   |  |                          |                                |
|--|---|--|---|--|--------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/552,625   | <b>FILING or 371(c) DATE</b><br>01/08/2007<br><b>RULE</b>   | <b>CLASS</b><br>073  | <b>GROUP ART UNIT</b><br>2855   | <b>ATTORNEY DOCKET NO.</b><br>TANN3002/FJD |                          |                                |
| <b>APPLICANTS</b><br>Raimund Becher, Ehrenkirchen, GERMANY;<br>Juergen Tanner, Kandern, GERMANY;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/EP04/03680 04/06/2004<br><b>** FOREIGN APPLICATIONS *****</b><br>GERMANY 103 16 033.7 04/07/2003<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>04/10/2007 |   |  |   |  |                          |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and Acknowledged <u>/ANDRE J ALLEN/</u><br>Examiner's Signature   |   | <input type="checkbox"/> Met after Allowance<br>AA<br>Initials | <b>STATE OR COUNTRY</b><br>GERMANY  | <b>SHEETS DRAWINGS</b><br>2                | <b>TOTAL CLAIMS</b><br>6 | <b>INDEPENDENT CLAIMS</b><br>1 |
| <b>ADDRESS</b><br>BACON & THOMAS, PLLC<br>625 SLATERS LANE<br>FOURTH FLOOR<br>ALEXANDRIA, VA 22314   |   |  |   |  |                          |                                |
| <b>TITLE</b><br>Relative pressure measuring transmitter  |   |  |   |  |                          |                                |
| <b>FILING FEE RECEIVED</b><br>1030   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                          |                                |